

Work Order ID 110236

December-17-13 9:18:57 AM

110236

Page 1

Item ID: D3019-1 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Back Cushion
Start Date: 12/17/13 Start Qty: 4.00 ***4*** Cust Item ID:
Required Date: 12/17/13 Req'd Qty: 4.00 ***4*** Customer:
Reference:

Approvals: Process Plan: MLJ Date: 12-12-17 Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3019	B

100 PURCHASING 0.00
100
Purchasing Memo 0.00
Purchasing Issue P/O: 22422
Possible supplier: Chestnut Ridge Airflex fire-resistant aircraft cushioning
Order: Grade 30-40 (colour green), Density 2.6lb/ft³
Material must meet FAR 27.853(a) or 25.853(a), Part is symmetric about centerline

CZ13112/18 (4)

110 Receive & Inspect for Damage & Mat'l Certs 0.00
110
Packaging Memo 0.00
Packaging Ensure Material Release Note is attached

4x SP 13-12-30

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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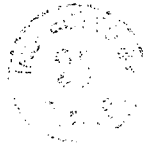
CHESTNUT RIDGE FOAM, INC.

443 WAREHOUSE DR.
LATROBE, PA 15650

P/N: 601988-99

SO# : **48863**

DATE MFD: **01/14**



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Work Order ID 110236

December-17-13 9:18:57 AM

110236

Page 2

Item ID: D3019-1 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Back Cushion
Start Date: 12/17/13 Start Qty: 4.00 ***4*** Cust Item ID:
Required Date: 12/17/13 Req'd Qty: 4.00 ***4*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing Memo *****REMOVE "CHESTNUT FOAM" LABEL AND ATTACH TO WORK ORDER FOR TRACEABILITY*****	0.00 0.00		DAS 27 9-89 14/1/17		4			
130 *130* Packaging Packaging	Identify as per dwg & Stock Location: <u>8T264</u> Memo	0.00 0.00				1/1			DAS 26 9-89
140 *140* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00							14-01-8 02/6/2014 14-01-8

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

December-17-13 9:18:56 AM

Page 1

Work Order ID: 110236
Parent Item: D3019-1
Parent Item Name: Back Cushion

Start Date: 12/17/13 Required Date: 12/17/13
Start Qty: 4.00 Required Qty: 4.00

Comments: IPP: B01.06.07Removed acid etch & alodine EC/SM IPP REV:C 11.08.08 added note
per NCR 11-588 DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3019-1P Back Cushion		Purchased	No			110	Each	0.0000	1	4x 4		Sp 13-12-30	

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

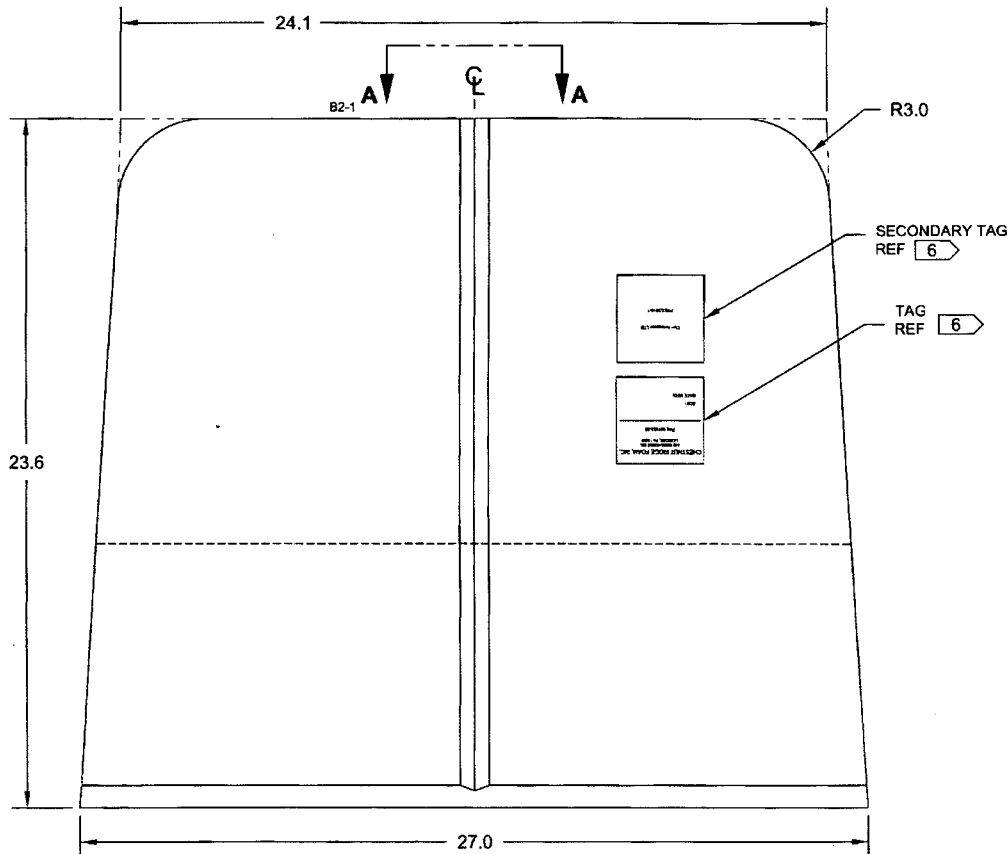
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Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Transport <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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SPECIFICATION CONTROL DRAWING



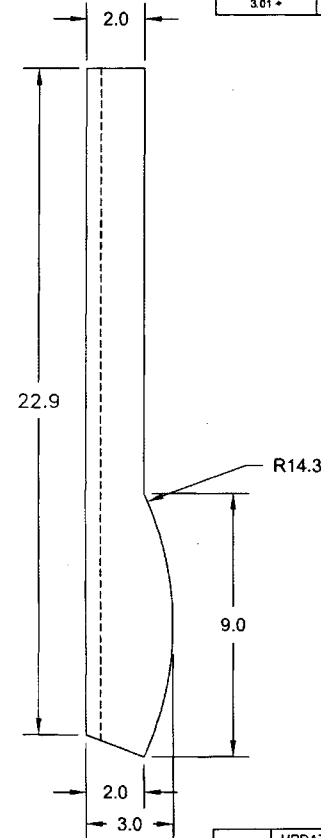
D3019-1 BACK CUSHION

NOTES:

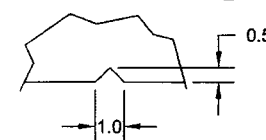
- 1) MATERIAL: MUST MEET FAR 27.853(a) OR 25.853(a)
AIRFLEX FIRE-RESISTANT AIRCRAFT CUSHIONING
GRADE 30-40 (COLOUR GREEN)
DENSITY 2.6 lb/ft³
- 2) FINISH: NONE
- 3) TOLERANCES: PER TABLE 1
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A

- 6) IDENTIFICATION: TAG(S), BURNED, TO SHOW THE FOLLOWING AT MINIMUM:
CHESTNUT RIDGE FOAM, INC.
443 WAREHOUSE DR.
LATROBE, PA 15650
SO#
DATE MFD:
DART AEROSPACE LTD. P/N D3019-1
- 7) PART IS SYMMETRICAL ABOUT CENTERLINE
- 8) MAKE PER TEMPLATE
- 9) POSSIBLE SUPPLIER: CHESTNUT RIDGE P/N 601988-99

TABLE 1							
THICKNESS/ HEIGHT	TOLERANCE		LENGTH/ DEPTH	TOLERANCE		WIDTH (LEFT TO RIGHT)	TOLERANCE
(+)	(-)	(+)	(-)	(+)	(-)	(+)	(-)
0.0 - 0.50	0.06	0.06	0.00 - 6.00	0.06	0.06	0.00 - 6.00	0.06
0.51 - 1.00	0.13	0.06	6.01 - 12.00	0.13	0.13	6.01 - 12.00	0.13
1.01 - 3.00	0.13	0.06	12.01 - 24.00	0.25	0.25	12.01 - 24.00	0.25
3.01 +	0.19	0.13	24.01 +	0.50	0.38	24.01 +	0.50



110236 MJS
13-12-17



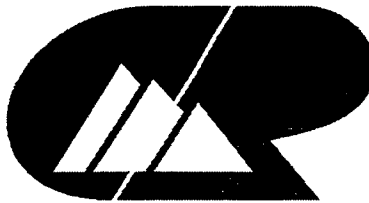
VIEW A-A
D7-1

RELEASED
2011-05-13
JAN

B	UPDATE TO CURRENT STD; DRAWING REVISED IAW CHESTNUT RIDGE MFG DWG. REF: NCR11-588	MB	11.05.10
A	NEW ISSUE	CP	01.05.18
REV.	DESCRIPTION	BY	DATE
DESIGN	147	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	147		
CHECKED	147		
MFG. APPR.	147		
APPROVED	147		
DE APPR.	147	BACK CUSHION	
DATE	11.05.10	<small>COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

Chestnut Ridge Foam, Inc.
443 Warehouse Drive
P.O. Box 781
Latrobe PA 15650

Phone: 724-537-9000
Fax: 724-537-9003



Packing Slip: 61216

PACKING SLIP

Page: 1

Ship To:

Fed Exp #1517-9324-0
Dart Aerospace Ltd.
1270 Aberdeen Street
Tel: 613-632-3336
Hawkesbury ONTARIO, CANADA K6A 1K7

Sold To:

Chantal Lavoie Fax#: 613-632-1053
Dart Aerospace Ltd.
1270 Aberdeen Street
Tel: 613-632-3336
Hawkesbury ONTARIO, CANADA K6A 1K7

PO: 22422

Ship Via: Fed Exp Int Pl

FOB: Origin

Ship Date: 12/23/2013

SO: 48863

Sales Person: Aircraft

Customer requests a 12-31-13 ship date.

Certificate of Conformance to 14CFR 25.853(a) 12 Second Vertical Burn with Shipment

Line	Planned Qty	Shipped Qty	Backorder	Part Number	Revision
1	✓ 4.00EA	4.00	0.00	D3018-1P	
				Description: AIRFLEX Bottom Cushion	
				Our Part: 502148-99	
2	✓ 4.00EA	4.00	0.00	D3019-1P	
				Description: AIRFLEX Back Cushion	
				Our Part: 601988-99	

CONTACT CHESTNUT RIDGE FOAM IF THERE IS DAMAGE OR DISCREPANCIES 724-537-9000

8813-12-30



ACI-573212951210

Commercial Invoice

Invoice Number	Purpose of Shipment	Curr	Ult Dest.	Air Waybill Nbr.
Export Dt	C.I. References	USD	CA	573212951210
12/23/2013		Pkgs	Bill T/C	Bill D/T/F
		2	1517-9324-0	1517-9324-0
		BOX		

Shipper:
Greg Bittner
Chestnut Ridge Foam Inc.
443 Warehouse Drive
Rt 981
Latrobe
PA 15650 US (724) 537-9000
ID/EIN:251530068

Consignee:
CHANTAL LAVOIE
DART AEROSPACE LTD.
1270 ABERDEEN STREET
HAWKESBURY
ON K6A1K7 CA (613) 632-3336
ID/EIN:

Broker

Importer
CHANTAL LAVOIE
DART AEROSPACE LTD.
1270 ABERDEEN STREET
HAWKESBURY
ON K6A1K7 CA (613) 632-3336
ID/EIN:

Part Nbr:	Marks/Nbrs:	Cntry MFG:US	Net Wgt:	43.00 lbs
HS Code:	Unit Qty: 2.00 PCS	Unit Value: 214.340000	Commodity Value: 428.68	
Desc: CELLULAR RUBBER				

These commodities, technology, or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to United States law is prohibited.	Total Shipment Weight: 43	Total Commodity Value: 428.68
		Terms of Sale: FCA/EXW
		Freight: 0.00
		Insurance: 0.00
		Others: 0.00
		Total Invoice Value: 428.68

Comments:

- 1)
- 2)
- 3)

I declare all information in this invoice to be true and correct.

Signature of shipper: Greg Bittner

12/23/2013



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO22422**

Purchase Order Date 12/18/2013

PO Print Date 12/18/2013

Page Number 1 of 1

Order From :
CHESTNUT RIDGE FOAM, INC.
PO BOX 6015
HERMITAGE, PA 16148
US

YU-CHE001

Ship To : DART AEROSPACE LTD
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
02/13/18

Contact Name
Vendor Phone 724 537 9000

Ship To Contact
Ship To Phone
Ship Via: FedEx PI collect
Ship Acct:

Buyer
Customer POID
Customer Tax # 10127-2607
Terms Net 30
Currency USD
FOB Destination-Collect

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	D3018-1P AS PER DWG D3018 REV. B B110191	Seat Cushion	1/8/2014 Yes 1/8/2014		✓ 4.00 Each	\$60.40	\$241.60
						Line Total:	\$241.60
2	D3019-1P AS PER DWG D3019 REV. B B110236	Back Cushion	1/8/2014 Yes 1/8/2014		✓ 4.00 Each	\$46.77	\$187.08
						Line Total:	\$187.08
						PO Total:	\$428.68

SP13-12-30

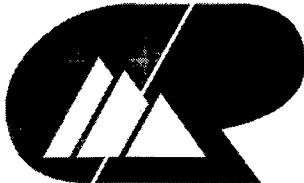
CZML

Note: Pricing listed above is as per contract agreement between Dart Aerospace and the respective manufacturer.
No substitution or deviation without consent.
Certificate of Conformity or Material Certification required ☒ YES ☐ NO
PST# 6122-5207

Change Nbr:

1

Change Date: 12/18/2013



Chestnut Ridge
Foam, Inc.

Certificate of Conformance

SOLD TO:

Dart Aerospace
1270 Aberdeen Street
Hawkesbury
Ontario CANADA K6A 1K5

PURCHASE ORDER: 22422

SALES ORDER: 48863

DATE SHIPPED: 12.23.2013

**"URGENT! FLAMMABILITY CERTIFICATION
ENCLOSED. PLEASE FORWARD TO
PURCHASING. DO NOT THROW AWAY!"**

*I certify that the individual components comprising the part shipped
against the above-referenced purchase order meets the following
requirements:*

14 CFR 25.853(a), APPENDIX F, PART 1(a)(1)(ii), AMENDMENT 25-116

Quantity	Customer Part Number	CRF Part Number	Material	Batch Number
4	502148-99	D3018-1P	AIRFLEX 55-65	AF13045
4	601988-99	D3019-1P	AIRFLEX 30-40	AF13045

MADE IN THE U.S.A

Grace Harr

Digitally signed by Grace Harr
DN: cn=Grace Harr, o=Chestnut Ridge
Foam, Inc., ou=QA Inspector,
email=crfqc@chestnutridgefoam.com, c=US
Date: 2013.12.23 08:55:15 -05'00'

❖ 443 Warehouse Drive Latrobe, PA 15650
❖ Phone: 724-537-9000 Fax: 724-537-9003

CHESTNUT RIDGE FOAM INC.
VERTICAL BURN TEST # 15165
12-SECOND VERTICAL BUNSEN BURNER TEST
FOR CABIN AND CARGO COMPARTMENT MATERIALS
SHOWING COMPLIANCE TO THE REQUIREMENTS OF 14 CFR 25.853

PRODUCT : CR AIRFLEX
BATCH / LOT NO : AF13045
CUSTOMER : PRODUCTION
P.O. NO :
OTHER IDENTIFICATION : AFX 55-65

TEST BEING RUN : VERTICAL BUNSEN BURNER TEST: 12 SECOND IGNITION TIME
MEETS REQUIRED MINIMUM FLAME TEMPERATURE OF 1550°F : YES

MATERIAL COMPOSITION : AIRFLEX

MATERIAL PATTERN : NA

MATERIAL COLOR : ORANGE

CONDITIONING STARTED : DATE : 12/17/13
TIME : 7:40 AM

TEST STARTED : DATE : 12/18/13
TIME : 8:55 AM

RESULTS :


	FLAME TIME (SECONDS)	DAS 27 9-89	DRIPPINGS (SECONDS)	BURN LENGTH (INCHES)
#1.	0.0		0.0	1.8
#2.	0.0		0.0	2.0
#3.	0.0		0.0	1.7
AVG.	0.0		0.0	1.8

PASS : X FAIL :

COMMENTS :

THIS MATERIAL MEETS THE REQUIREMENTS OF THE 14 CFR, PART 25, SECTION 25.853,
PARAGRAPH (a) AND APPENDIX F, PART 1, (a), (1), (ii).

TESTED BY : BETH ULATSKY
SR. LAB TECHNICIAN



CHESTNUT RIDGE FOAM INC.
VERTICAL BURN TEST # 15163
12-SECOND VERTICAL BUNSEN BURNER TEST
FOR CABIN AND CARGO COMPARTMENT MATERIALS
SHOWING COMPLIANCE TO THE REQUIREMENTS OF 14 CFR 25.853

PRODUCT : CR AIRFLEX
BATCH / LOT NO : AF13045
CUSTOMER : PRODUCTION
P.O. NO :
OTHER IDENTIFICATION : AFX 30-40

TEST BEING RUN : VERTICAL BUNSEN BURNER TEST: 12 SECOND IGNITION TIME
MEETS REQUIRED MINIMUM FLAME TEMPERATURE OF 1550°F : YES

MATERIAL COMPOSITION : AIRFLEX

MATERIAL PATTERN : NA

MATERIAL COLOR : GREEN

CONDITIONING STARTED : DATE : 12/17/13
TIME : 7:40 AM

TEST STARTED : DATE : 12/18/13
TIME : 8:45 AM

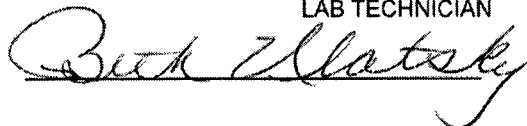
RESULTS :	FLAME TIME (SECONDS)	DAS 27 9-89	DRIPPINGS (SECONDS)	BURN LENGTH (INCHES)
#1.	0.0		0.0	1.5
#2.	0.0		0.0	2.0
#3.	0.0		0.0	2.0
AVG.	0.0		0.0	1.8

PASS : X FAIL :

COMMENTS :

THIS MATERIAL MEETS THE REQUIREMENTS OF THE 14 CFR, PART 25, SECTION 25.853,
PARAGRAPH (a) AND APPENDIX F, PART 1, (a), (1), (ii).

TESTED BY : BETH ULATSKY
LAB TECHNICIAN



CHESTNUT RIDGE FOAM INC.
VERTICAL BURN TEST # 15058
12-SECOND VERTICAL BUNSEN BURNER TEST
FOR CABIN AND CARGO COMPARTMENT MATERIALS
SHOWING COMPLIANCE TO THE REQUIREMENTS OF 14 CFR 25.853

PRODUCT: TICKING FR 4440 FABRIC
 BATCH / LOT NO.: 9744
 CUSTOMER: PRODUCTION
 P.O. NO.:
 OTHER IDENTIFICATION: SUPPLIED BY: HANES CONVERTING CO. OF CONOVER, NC
 ON INVOICE #62-134424

TEST BEING RUN: VERTICAL BUNSEN BURNER TEST: 12 SECOND IGNITION TIME
 MEETS REQUIRED MINIMUM FLAME TEMPERATURE OF 1550°F: YES

MATERIAL COMPOSITION: NA

MATERIAL PATTERN: WOVEN

MATERIAL COLOR: TAN

CONDITIONING STARTED: DATE: 9-16-13
 TIME: 9:00 AM

TEST STARTED: DATE: 9-18-13
 TIME: 10:20 AM

RESULTS:

	FLAME TIME (SECONDS)		DRIPPINGS (SECONDS)		BURN LENGTH (INCHES)	
	WARP	FILL	WARP	FILL	WARP	FILL
#1.	0.0	0.0	0.0	0.0	3.7	3.9
#2.	0.0	0.0	0.0	0.0	3.6	3.8
#3.	0.0	0.0	0.0	0.0	3.9	3.8
AVG.	0.0	0.0	0.0	0.0	3.8	3.8

PASS: X FAIL:

COMMENTS:

THIS MATERIAL MEETS THE REQUIREMENTS OF THE 14 CFR, PART 25, SECTION 25.853,
 PARAGRAPH (a) AND APPENDIX F, PART 1, (a), (1), (ii).

TESTED BY: KELLY BURES
 SR. LAB TECHNICIAN

CORPORATE OFFICE
 500 N. McLain Creek Rd.
 P. O. BOX 457
 CONOVER, NC 28613-0457
 PHONE (828) 464-4673
 FAX (828) 464-0459



INVOICE

PLEASE REMIT TO:
 HANES ENGINEERED MATERIALS
 L&P FINANCIAL SERVICES CO.
 P.O. BOX 60984
 CHARLOTTE, NC 28260

SOLD TO
 CHESTNUT RIDGE FOAM
 ROUTE 981 NORTH
 PO BOX 781
 LA TROBE, PA 15650

SHIP TO
 CHESTNUT RIDGE FOAM
 ROUTE 981 NORTH
 PO BOX 781
 LA TROBE, PA 15650

INVOICE NUMBER 62-134424	INVOICE DATE 9/11/2013	TERMS NET 30	CARRIER USF HOLLAND INC	ROUTING PER CUSTOMER REQUEST 5/17/01	PROCESSED C
CUSTOMER NO. 15985	CUSTOMER ORDER NO. 31978	SLS. MGR. / SLS. MGR. 65 452	ORDER DATE 9/06/2013	CONOVER, NC	DAY8
PRODUCT 30333	WIDTH 40.000	DESCRIPTION TICKING FR 4440	QUANTITY 5.052	UNIT LN	PRICE
CERTIFICATION: THE SELLER DOES NOT CERTIFY, EITHER IMPLICITLY OR EXPLICITLY, THESE PRODUCTS TO MEET THE REQUIREMENTS OF ANY REGULATORY AGENCY OR SPECIFICATION EXCEPT AS MAY BE CERTIFIED ABOVE OR UNDER SEPARATE WRITTEN CERTIFICATION. ALL TRANSACTIONS ARE SUBJECT TO THE CONDITIONS ON THE REVERSE SIDE OF THIS INVOICE.					
USF HOLLAND INC. PROP 10250581037					

15985
 ORIGINAL

214 THE LAWS OF THE STATE OF NORTH CAROLINA SHALL GOVERN THIS TRANSACTION. A LATE PAYMENT CHARGE AT A PER ANNUM RATE
 EQUAL TO THE PRIME RATE OF THE CHASE MANHATTAN BANK, N.A. IN EFFECT ON THE FIRST DAY OF EACH MONTH PLUS 2% OR 18% PER ANNUM
 WHICHEVER RATE IS HIGHER, WILL BE IMPOSED ON THE FIRST OF EACH MONTH ON ALL PAST DUE INVOICES PAID DURING THE MONTH

TOTAL INVOICE
 AMOUNT
 PAGE 1 LAST 41469